Independent Citizens Redistricting Commission

Application Review and Quality Control Sheet

Δ	pplicant Name:	José Andrés	Aroxiza			
	ate Received:	2/15/13	Applicant Number:	10256		
	ecommended A	l Status:				
R		Removed	Mincluded	Removed		
RE	QUIREMENTS	<u>.</u> :				
1.	Yes \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
	If NO, list tin	ne/date application was rece	ived:			
2.	2. Is the application complete? If NO, list the item(s) that need to be completed:					
3.		e applicant responded to the				
	A. Student enrolled in a college/university in the City of Austin? If YES, consider I and ii only; If NO, consider I, ii, iii, and iv:			ZYes □No		
	i. Res	ide in the City of Austin?		√Yes □No		
	ii. Reg	istered to vote in the City of	Austin?	✓Yes □No		
	iii. C on	tinuously registered to vote	in the City of Austin?	□Yes □No		
	iv. Vo t	ed in 3 of the last 5 City of A	ustin general elections?	□Yes ☑No		
*		led related to REQUIREMENT ify issue(s) addressed and dis		□Yes ☑No		

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CO	NED	ICTS	OF	INT	FRI	FST:
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	MELICIS OF INTEREST.	
4.	Did the applicant respond "Yes" to any conflict of interest q If YES, indicate which question(s):	uestions? Yes No
**	Follow-up needed related to CONFLICTS OF INTEREST? If YES, identify issue(s) addressed and disposition:	□Yes □No
	ONSISTENCY: Are applicant answers consistent? If NO, indicate which answer(s):	√☐Yes ☐No
÷	Follow-up needed related to CONSISTENCY? If YES, identify issue(s) addressed and disposition:	□Yes □No
	Application Reviewed By:	Review Date: 2/19/13 QC Review Date: 2/25/13
	Quality Control Review By:	OC Review Date:
	Follow-up Contact(s) Reviewed By:	Date: